10/76/862

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

14414-020001

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OR			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			32.					RATE	FEE	1	RATE	FEE -
FOR			NUMBER FILED		NUM	BER EXTRA		BASIC FE	385.00	OR	BASIC FEE	770.00
TC	TAL CHARGE	ABLE CLAIMS	3:2 minus 20=		•	12		X\$ 9=	108	OR	X\$18=	
INDEPENDENT CLAIMS				กบร 3 =	•	Ď		X43=	0	OR	X86=	·
MULTIPLE DEPENDENT CLAIM PRESENT					•]	÷145=	140	OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2							i	TOTAL	638	OR	TOTAL	
<u> 1/</u>	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						<u> </u>	SMALL	ENTITY	OR	OTHER THAN SMALL ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER BUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL .FEE		RATE	ADDI- TIONAL FEE
	Total	. 26	Minus	-3	<u>Z</u>	= Ø		XS 9=		OR	XS18=	
	Independent	· /	Minus	2	<u> </u>			X43=	7	OR	X86=	
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	7	OR	+290=	
								TOTAL ADDIT. FEE	/	OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colum	าก 2)	(Column 3)						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	*		.		XS 9=		OR	X\$18=	
	Incependent	•	Minus	***		=		X43=		OR	X86=	
	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM		」 [+145=		OR	+290=	
								TOTAL ODIT, FEE	·	OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total .	*	Minus	**		· =	I	X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		=	lt	X43=		ł	X86=	
`	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **OR +290= **TOTAL OR ADDIT FEE												
	f the "Highest Nur	mber Previously Pa ber Previously Paid	id For' IN THIS	SPACE is	less tha	n 3, enter "3."	_	DDIT. FEE L		•	NDDIT. FEE L JMn 1,	